FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



3235-0076 20, 2008 age burden hours

APPROVAL

SEC USE ONLY Prefix Scrial

Name of Offering (check if this is:	an amendment and name has changed, and indi	cate change.)		
	Fund, L.P., \$1,000,000,000 aggregate amount			
Filing Under (Check box(es) that apply): Type of Filing: [] New Filing	[] Rule 504 [] Rule 505 [X] Amendment	[X] Rule 506	[] Section4(6) [] ULOE	
	A. BASIC IDENTIFICATION DA	ATA		
. Enter the Information requested about t	he issuer.		<u> </u>	
Mondrian International Fixed Income I	·			
Address of Executive Offices (Number ar 105 North Market Street, Suite 1118, V	•	Telephone Number (Including Area Code) (302) 428-3839		
	(Number and Street, City, State, Zip Code)	Telephone Nun	nber (Including Area Code)	
Brief Description of Business	= 		OF0C	
Investment fund Type of Business Organization [] corporation [] business trust	[X] limited partnership, already formed [] limited partnership, to be formed	[] other (please spe	• •	
l business trust	[] limited partnership, to be formed		IAN 2 6 200	

GENERAL INSTRUCTIONS

Federal:

By Mo Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W. Washington, D.C. 20549.

Copies Required: Five (5) Copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator to each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. Basic Identification Data					
2. Enter the information requested for the following:					
Each promoter of the issuer, if the issuer has been organized within the past five years;					
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity					
securities of the issuer;					
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and					
Each general and managing partner of partnership issuers.					
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Mondrian Investment Group (US), Inc. (General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Ross, Paul (President, Chief Executive Officer and Director of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Karolyi, Patricia (Executive Vice President and Director of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Menegakis, Jason (Vice President - Legal Counsel and Chief Compliance Officer of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Wolko, Suzanne (Treasurer of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Hill, Heather (Secretary of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code) 1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual)					
Stampone, Jackie (Assistant Vice President of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner					
Full Name (Last name first, if individual) Langan, William K. (Assistant Secretary and Director of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or					
Managing Partner					
Full Name (Last name first, if individual)					
Gillmore, Clive (Director of the General Partner)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
1105 North Market Street, Suite 1118, Wilmington, Delaware 19801					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

FORM D

				В.	INFORM	ATION A	BOUT OF	FERING	·····			
I.	Has the	issuer sold,	or does the		nd to sell, t				offering?		Yes	No
									-		[]	[X]
2	With a la	40 ! !			lso in Appe							
2.					l be accepte d by the Ge							
3.					of a single u		niet in 112 2	oic aiscieti	VII.		Yes	No
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4.					person who							sion or
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				'	_							
Busines	s or Reside	nce Addres	s (Number a	and Street,	City, State,	Zip Code)						
Name o	f Associated	d Broker or	Dealer									
	110 . 4 . 0											
	n Which Per "All States"				ds to Solicit	Purchasers	S				□ All :	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
įмт́ј	[NE]	[NÝ]	[NH]	[NJ]	[NM]	[NY]	[NC]	[MD]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[ປຖ]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last na	me first, if	individual)									
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Dusines	s or Reside	iice Addres	s (Number a	and Street,	City, State,	Zip Code)						
Name o	f Associate	d Broker or	Dealer			,				-		
	Which Per				ds to Solicit	Purchasers	S				-	•
•	"All States"				(CO)	(CT)	(DE)	(De)	ter i	(CA)		
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last na	me first, if	individual)									· _
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Busines	s or Reside	nce Addres	s (Number a	and Street,	City, State,	Zip Code)						
Name o	f Associate	d Broker or	Dealer						*			
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	n Which Per				ds to Solicit	Purchasers	5					
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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Busines	s or Reside	nce Addres	s (Number a	and Street,	City, State,	Zip Code)						
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maine o	f Associate	i Dioker of	Dealer									
States in	Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solicit	Purchasers	<u> </u>					
	"All States"										□ All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NA]	[NH]	[NJ]	[NM]	(NY)	[NC] [VA]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[v A]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVES	STORS, EXPENSES AND USE OF	PROCEEDS
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this		
box and indicate in the columns below the amounts of the securitie	s	
offered for exchange and already exchanged. Type of Security Debt	Aggregate Offering Price	Amount Already Sold
	* -	\$0
Equity	20	\$0
☐ Common ☐ Preferred Convertible Securities (including warrants)	→ =	\$0
Partnership Interests	\$1,000,000,000	\$81,080,000
Other (Specify)	\$0	\$0
Total	\$1,000,000,000	\$81,080,000
Answer also in Appendix, Column 3, if filing under ULOE.	+-,, ,	, ,
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	is	
none of zero.	Number of Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	12	\$81,080,000
Non-accredited Investors.		\$0
Total (for filings under Rule 504 only)	-	\$0
Answer also in Appendix, Column 4, if filing under ULOE.	V	40
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$0
Regulation A	•	\$0
Rule 504	•	\$0
Total.		\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and chec the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs. Legal Fees. Accounting Fees. Engineering Fees. Sales Commissions (specify finders' fees separately).		\$ 0.00
Other Expenses (identify)		
Other Expenses (identify)		\$ 0.00

C.	OFFERING PRICE.	NUMBER O	F INVESTORS	EXPENSES AND	USE OF PROCEEDS
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payments listed must equal the adjusted gross proceeds to the issuer set forth in

Total Payments Listed (column totals added).....

response to Part C - Question 4.b above.

		Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and fees.	C1 \$ 0.00	Milliaco	\$ 0.00
Purchase of real estate.			\$ 0.00
Purchase, rental or leasing and installation of machinery and equipment	\$ 0.00		\$ 0.00
Construction or leasing of plant buildings and facilities	🗖 \$ 0.00		\$ 0.00
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets	\$ 0.00		\$ 0.00
securities of another issuer pursuant to a merger)			
Repayment of indebtedness	\$ 0.00		\$ 0.00
Working capital			\$ 0.00
Other (Specify): Investments			\$1,000,000,000
Other (Specify):	\$ 0.00		
	🗖		\$ 0.00
Column Totals	🕱 💲 0.00		\$1,000,000,000

	D. FEDERAL SIGNATURE	
The issuer has duly caused this notice to be signed by the u	undersigned duly authorized person. If this notice is filed u	inder Rule 505, the following signature
constitutes an undertaking by the issuer to furnish to the U		
furnished by the issuer to any non-accredited investor purs	suant to paragraph (b)(2) of Rule 502.	
Issuer (Print or Type)	Signature () ()	Date
Mondrian International Fixed Income Fund, L.P.	NULUX-	1112107
Name of Signer (Print or Type)	Title of Signer (Print or Type)	- ,
William K. Langan	Assistant Secretary of Mondrian Juvestment Gro	up
ū	(US), Inc., the General Partner of the Issuer	

\$1,000,000,000

ATTENTION	
Intentional misstatements or amissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)	